



montgomerycountymd.gov/rec

11315 Falls Road, Potomac, MD 20854.

Questions? Call the Club Friday/After Hours Information line at 240-777-6957

Join your friends for a fun packed evening each month
filled with Live Bands by School House Rock,
music/dancing, sports & more!

Potomac after hours

A SPECIAL PROGRAM FOR 6TH-8TH GRADERS

October 4 • November 1 • December 6
January 3 • February 1 • March 7

9:15PM - 11:00PM

Annual Membership Fee: \$25.00

Course #366754

Guest Fee: \$5.00 @ door

How do you register?

- Online: montgomerycountymd.gov/rec; go to RecWeb
- Fax: 240-777-6818 (payment by VISA or MasterCard)
- Mail: Registrar, 4010 Randolph Rd, Silver Spring, MD 20902
- You may also personally deliver your registration form to PCC, but there is no guarantee that the hand delivered flyers will be registered that same day.

Payment Information

Full payment is due with registration. Non-county residents pay an additional \$15 per participant per activity. Financial assistance is available to county residents who qualify. Call 240-777-6840 for information.

ATTENTION PARENTS!

PCC's After Hours program values your support and generosity. Volunteers are critical to After Hours' success. We expect each parent to commit to at least one evening as an After Hours volunteer sometime during 2013-2014.

Montgomery County Recreation is committed to compliance with the Americans with Disabilities Act (ADA). Please contact a Therapeutic Recreation Specialist at 240-777-6870 or rec.mainstream@montgomerycountymd.gov to request accommodations.

Behavior Policy

The Mission of Department of Recreation is to provide fun and safe recreation and leisure services for youth.

Teen Program Rules

- Youth must attend school in Montgomery County or be a Montgomery County resident in 9th to 12th grade.
- Smoking, use of alcoholic beverages or other drugs, vandalism, possession of weapons (no pocketknives, chains, etc.) or misconduct will result in immediate notification of parents and appropriate disciplinary action.
- Appropriate dress and language are expected at all times. (Inappropriate clothing includes any which advertises or advocates the use of cigarettes, alcohol, or other drugs or which does not adequately cover the body.)
NO HATS, DO RAGS, BANDANAS.
- Appropriate dancing is expected at all times. (no moshing, sandwiching, grinding or bending over).
- If you choose to leave the activity, you may not re-enter and must leave the premises.
- Absolutely no water, drinks or food may be brought in to the event.
- Participants must maintain an atmosphere free from all forms of sexual harassment.
- Upon entrance you agree to be searched.
- Late Pick Up Policy: An overtime fee of \$10 for each fifteen minutes (or portion of fifteen minutes) per student is assessed regardless of the reason for being late. Payment is due at the time of pick up. The student may not participate in future events until late payment is made. Repeated offenses may result in the student not being allowed to participate in future events.

If your check is returned unpaid, your account will be debited electronically for the original check amount and electronically or via paper for the state's maximum allowable service fee. Payment by check constitutes authorization of these transactions. You may revoke your authorization by calling 800-666-5222 ext. 2 to arrange payment due for any outstanding checks and service fees due.

I have read the rules and regulations for Teen program activities and agree to abide by them. I realize that failure to obey these rules may result in my removal or expulsion from these events.

Student's Signature _____ Date _____

Parent's Signature _____ Date: _____



Registration Form

☐ Check here if new address/phone/email.
Please print. This form may be duplicated.

PAYER'S: Last Name _____ First Name _____ Email _____

Address _____ City _____ State _____ Zip _____

Home Phone () _____ Work Phone () _____ Cell Phone () _____

PARTICIPANT'S: Address _____ City _____ State _____ Zip _____
(if under 18 years)

Mother's Name _____ Email _____

Home Phone () _____ Work Phone () _____ Cell Phone () _____

Father's Name _____ Email _____

Home Phone () _____ Work Phone () _____ Cell Phone () _____

Participant's Name (last, first)	Birthdate mm/dd/yy	Sex m/f	School Attending	Grade	Activity Name	Course Number	Location	Start Date	Start Time	Fees*

*If you are a non-resident, include an additional \$10.00 per participant in the fee for each activity.

☐ Check or Money Order payable to MCRD, Attn: Registrar, 4010 Randolph Road, Silver Spring, MD 20902.

Total Amount Due: \$

☐ Master Card ☐ Visa Card No. _____ Expiration Date _____

CARDHOLDER: Name (print) _____ Signature _____ Date _____

If paying by credit card, you may **fax** your registration form to **240-777-6818**. If you need help completing this form, please call 240-777-6840.

The participant assumes all risks associated with participation in the program; the County assumes no liability for injury or damages arising from participation in the program. Due to the strenuous nature of some activities, the County encourages each participant to consult his or her physician concerning fitness to participate in the program. The participant consents to emergency treatment. The participant also consents to the County's use of the participant's image and likeness as shown in any photographs, videotapes, motion picture film, or electronic images and any audio recordings made of the participant's voice in whatever way the County desires, including television print and Internet websites. Furthermore, the participant consents that such photographs, films, recordings, electronic images shall be the sole property of the County. If the participant is a minor, the parent or guardian approves his or her participation in the program. Neither the instructor nor any staff are responsible for children prior to or after scheduled program.

Participant or Parent/Guardian Signature _____ Date _____